

TO:Auto-reply fax to 2064170485

COMPANY:



## Auto-Reply Facsimile Transmission

*First Faxel on 4/12/2010 Address Change*

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FROM : SENNCO	FAX NO. : 2064170485	Apr. 21 2010 01:49PM PT
Doc Code: TRAN.LET		
Document Description: Transmittal Letter		
PAGE 12*RCVD AT 4/13/2010 6:39:23 PM [Eastern Daylight Time] *SVR:USPTO-EFXRF-5/34 *DNIS:2738300 *CSID:2064170485 *DURATION (mm:ss):01-08		
<p><i>Please Change Address with Examiner, ASAP.</i></p> <p><i>Examiner: Ramsey Refai Art Unit: 3627 Application #: 09/1888/554 File Date: 6/26/2001</i></p>		

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MAY 13 2010

PTO/SB/21 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031  
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TRANSMITTAL  
FORM

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Total Number of Pages in This Submission

Application Number

09,888,554

Filing Date

06/26/2001

First Named Inventor

Steven M. Senn

Art Unit

3627

Examiner Name

Refai, Ramsey

Attorney Docket Number

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> <input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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## Remarks

Change of Correspondence  
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Steven M. Senn / Sennco

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Steven M. Senn

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